

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Finn Thv. Larsen

Application No.: 10/520,398

Confirmation No.: 5172

Filed: January 5, 2005

Art Unit: 3752

For: SHOWER HEAD

Examiner: D.D. Hwu

TRANSMITTAL LETTER

MS Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

22511
PATENT TRADEMARK OFFICE

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:


1. Part B- Fee(s) Transmittal; and
2. Fee Transmittal (1 page).

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith to our Deposit Account No. 50-0591, under Order No. 17114/004001.

Dated: November 19, 2007

Respectfully submitted,

By

 #45,079
Jonathan P. Osha THOMAS SCHERER
Registration No.: 33,986
OSHA · LIANG LLP
1221 McKinney St., Suite 2800
Houston, Texas 77010
(713) 228-8600

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).		Complete if known	
FEE TRANSMITTAL For FY 2008		Application Number	10/520,398-Conf. #5172
		Filing Date	January 5, 2005
		First Named Inventor	Finn Thv. Larsen
		Examiner Name	Not Yet Assigned
		Art Unit	3752
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	17114/004001
TOTAL AMOUNT OF PAYMENT	(\$)	1,740.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Deposit Account	<input checked="" type="checkbox"/> Credit Card Deposit Account Number: <u>50-0591</u> Deposit Account Name: <u>Osha - Liang LLP</u>
<input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Small Entity	Small Entity	Small Entity	Small Entity	Small Entity	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES		Small Entity
Fee Description	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims Extra Claims Fee (\$) Fee Paid (\$)	Multiple Dependent Claims Fee (\$) Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20. - 20 = _____ x _____ = _____	
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)	
HP = highest number of independent claims paid for, if greater than 3. - 3 = _____ x _____ = _____	

3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$) Fee Paid (\$)
_____	- 100 = _____	/50 = _____ (round up to a whole number) x _____ = _____	

4. OTHER FEE(S)		Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): 1501 Utility issue fee		1,440.00
1504 Publication fee for early, voluntary, or normal ...		300.00

SUBMITTED BY			
Signature	<u>[Signature]</u>	Registration No. (Attorney/Agent)	33,986
Name (Print/Type)	Jonathan P. Osha	Date	November 19, 2007